

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								APPLICATION NO. 547955810	FILING DATE				
								APPLICANT(S)					
								CLAIMS					
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.							
1	/							61					
2	/							62					
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TOTAL INC.	2							TOTAL IND.					
TOTAL DEP.	6							TOTAL DEP.					
TOTAL CLAIMS	8							TOTAL CLAIMS					

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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